Ţ								(	91	91	574	65	
								Ā	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000								-046447-0234					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL EI	VIIIY	OR	OTHER SMALL		
TOTAL CLAIMS			12				F	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/ 5 minus 20=		•		<b>-</b> [5	<b>(\$ 9=</b>		OR	X\$18=		
INDEPENDENT CLAIMS			O minus 3 =		•		T	(40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					125-			+270=		
• 10	the difference	in column 1 is	less than zer	ess than zero, enter "0" in o			+135= Imn 2 TOTAL			OR	TOTAL	510	
* If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR TOTAL  OTHER TH													
5 1	1905	(Column 1) (Column 2) (Column 3)							ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA	F	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 15	Minus	•:2	0	- /	<b>5</b>	<b>(\$ 9</b> =		OR	X\$18=		
	Independent	· 2	Minus		3	•/	1,	(40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM	/	1.	135=		OR	+270=		
1.1			•				L	YOYAL	-	00	TOTAL		
9	11305	(Column 1)	(Column 2) (Column 3)			ADC	XIT. FEE		,	ADOIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 14	Minus	<u>•• \(  \)                                   </u>	<u>D</u>	•	>	<b>(\$ 9=</b>		OR	X\$18=		
	Independent	NTATION OF M	Minus ULTIPLE DEP	ENDEN	TCLAIM	-	,	(40=		OR	X80=		
								135=		OR	+270=		
								TOTAL NT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)												_	
AMENDMENT C		CLAIMS REMAINING AFTER . AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	60		a	×	<b>(\$ 9=</b>		OR	X\$18=		
	Independent	•	Minus	***		Ξ.		(40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.										OA	+270=		
**	"If the Trighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The Trighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The Trighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												